

## Some Recent Changes in the Composition of Physicians In California

THE PAST SEVEN-MONTH period has seen some interesting changes take place in the composition of physicians in non-federal practice within the State of California. The number of General Practitioners increased almost 10 per cent and the number of part-time specialists more than doubled. The changes are the more noticeable since these classifications have consistently shown decreases during the past several years.

The cause of these increases was the merger with Osteopaths effected in late 1962. These changes affect the overall composition of physicians within the State. The most substantial alteration is in the proportion of part-time specialists among all non-federal physicians; in June, 1962, this group accounted for only 3.9 per cent of the total, whereas in February, 1963, it accounted for 7.4 per cent.

Table 1 shows numbers of physicians by type of practice before and after the merger. Excluded are all physicians employed by the federal government. The overall increase of 9.9 per cent is, for the most part, attributable to the approximately 2,335 Osteopaths who became M.D.'s during this period. It is estimated that net in-migration of physicians during this seven-month period accounted for under 300 of the overall increase of 2,643.

The increase in part-time specialists is, of course, the most substantial among the major private practice groups shown in Table 1. Both this and the increase in General Practice are due to the inclusion of former Osteopaths; the number of former Osteopaths within these two categories is, in fact, most probably greater than the differences between the July and February figures shown in the table, since both categories might otherwise have been expected to show decreases. The increase in full-time specialists is, on the other hand, due to net in-migration and to California physicians entering private practice during this period.

Among those physicians not in private practice, the Laboratory Medicine classification shows the greatest increase. The change is somewhat misleading, however, since many Pathologists formerly considered by A.M.A.'s Records Department as private practitioners (full-time specialists) are now classified within this group. Increases in Medical School Faculty and Medical Administration are primarily due to the merger, whereas changes in the Hospital Service, Preventive Medicine, and Retired groups

TABLE 1.—Type of Practice of Non-Federal Physicians in California, July, 1962 and February, 1963

Type of Practice	July, 1962	February, 1963	Per Cent Change
General Practice .....	5,447	5,964	+ 9.5
Full-time Specialty .....	12,653	13,003	+ 2.8
Part-time Specialty .....	1,047	2,189	+ 109.1
Total Private Practice.....	19,147	21,156	+ 10.5
Intern and Resident.....	3,219	3,175	- 1.4
Full-time Hospital Staff.....	1,040	1,096	+ 5.4
Medical School Faculty.....	429	573	+ 33.6
Administration .....	141	263	+ 86.5
Laboratory Medicine* .....	54	191	+ 253.7
Preventive Medicine .....	592	610	+ 3.0
Research .....	179	252	+ 40.8
Retired and Not in Practice....	1,980	2,108	+ 6.5
Total, Not in Private Practice	7,634	8,268	+ 8.3
TOTAL .....	26,781	29,424	+ 9.9

\*Increase due primarily to reclassification of many Pathologists formerly listed as full-time specialists in private practice.

can be attributed to natural increases. The increase in the Research category is probably due to a combination of reasons which cannot be determined from the data included in this report. A slight decrease is shown in the number of Interns and Residents; this may be seasonal, since a report for October, 1962 indicated higher figures than for either July or February.

Table 2 shows data for physicians in General Practice and for those who engage in specialties on a part-time basis only. Estimates are indicated as to the number of former Doctors of Osteopathy who practice these specialties. The addition of these physicians approximately doubled the number of part-time Anesthesiologists, Dermatologists, General Surgeons, Orthopedists, Colon and Rectal Surgeons, Urologists, and physicians practicing Preventive Medicine. Numbers of Internists and Obstetrician-Gynecologists were almost tripled. The most marked increase is noted in the specialty of Physical Medicine and Rehabilitation; this specialty had one part-time practitioner last July and twenty-one the following February.

This table also shows a comparison between the former Osteopaths and the original group of M.D.'s in part-time specialties. The Osteopathic group is far more prevalent in Internal Medicine and Obstetrics-Gynecology; the original M.D. group shows relatively higher proportions in Psychiatry and Pediatrics.

Data contained in this report are taken from the A.M.A. Directory Report Service Quarterly Tables, which contain information as to Type of Practice and Specialty by State. Since A.M.A. has continued to refine type of practice classifications in recent years, there has occurred a degree of change due only to the redistribution of physicians. This is most

TABLE 2.—Private Practice: Part-Time Specialties and General Practice in California, July, 1962 and February, 1963

Specialty	Part-time Specialists and G.P.'s		Estimated Breakdown of Former D.O.'s		Per Cent Breakdown of Former D.O.'s (excludes G.P.'s)	Estimated Per Cents of M.D.'s (excluding Former D.O.'s) by Specialty (excludes G.P.'s)
	July 1962	Feb. 1963	Number <sup>4</sup>	Per Cent		
Administrative Medicine.....	1	0	0	....	....	0.1
Internal Medicine <sup>1</sup> .....	167	428	261	15.9	23.2	16.0
Anesthesiology.....	63	121	58	3.5	5.1	6.0
Preventive Medicine <sup>2</sup> .....	44	92	48	2.9	4.3	4.2
Psychiatry.....	57	73	16	1.0	1.4	5.5
Dermatology.....	16	29	13	0.8	1.2	1.5
Pathology.....	7	7	0	....	....	0.7
General Practice.....	5,447	5,964	517	31.4	....	....
General Surgery.....	393	776	383	23.3	34.0	37.7
Neurosurgery.....	2	3	1	.... <sup>5</sup>	0.1	0.2
Neurology.....	4	7	3	0.2	0.3	0.4
Obstetrics-Gynecology.....	130	349	219	13.3	19.4	12.5
Ophthalmology.....	14	16	2	0.1	0.2	1.0
Orthopedic Surgery.....	18	40	22	1.3	2.0	1.7
Otolaryngology.....	15	18	3	0.2	0.3	1.4
Pediatrics <sup>3</sup> .....	64	97	33	2.0	2.9	6.1
Physical Medicine and Rehabilitation.....	1	21	20	1.2	1.8	0.1
Plastic Surgery.....	2	5	3	0.2	0.3	0.2
Colon and Rectal Surgery.....	17	39	22	1.3	2.0	1.6
Radiology.....	11	17	6	0.4	0.5	1.1
Thoracic Surgery.....	1	1	0	....	....	0.1
Urology.....	16	31	15	0.9	1.3	1.5
TOTAL.....	6,490	8,134	1,644*	100.0	100.0	100.0

<sup>1</sup>Also includes Allergy, Cardiovascular Diseases, Gastroenterology, and Pulmonary Diseases.

<sup>2</sup>Also includes Aviation Medicine, Occupational Medicine, and Public Health.

<sup>3</sup>Also includes Pediatric Allergy and Pediatric Cardiology.

<sup>4</sup>Does not add to total due to inconsistency in Administrative Medicine Specialty.

<sup>5</sup>Less than 0.05.

\*It should be noted that this figure does not include all former Osteopaths who received M.D. degrees after the merger. This is due to the fact that not all reports to the A.M.A. from these physicians were received in time to be included in the February tabulations. Hence, a discrepancy exists between the estimates in Table 2 and the increase indicated in the text of this report. The percentage breakdown by specialties shown in the table, however, should generally reflect those in which the former Osteopaths are engaged.

evident in Laboratory Medicine, as mentioned earlier. These tables, therefore, cannot easily be compared to those in a compendium published earlier by the California Medical Association entitled "Characteristics of Physicians in California, Spring 1961" nor with the article which appeared in the

November, 1962, issue of CALIFORNIA MEDICINE. This incomparability is likewise true within the medical specialties, which have in some cases been regrouped by A.M.A. since earlier reports were published.

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